



CITY OF EASTHAMPTON PARKS & RECREATION COMMISSION

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Commission Members:
Arthur H. Lussier, Chairman
John J. Sheehan, Secretary
Robert W. Biardi
Ronald R. Hiltbold
Andrew Hunter
James P. Ramsey

Please call or e-mail for availability, then fill out this form and submit.

Pavilion Rental Application

Pavilion 1 Pavilion 2 Pavilion 3 Pavilion 4

Date: _____

Set up Time: _____

Event Hours: Start Time: _____

End Time: _____

Type of Event _____

Name of Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work/Cell: _____

Fax #: _____ Email: _____

Company/Organization _____

Non-Profit #: _____

Please indicate the following:

Will alcohol be served?	<input type="checkbox"/> yes	<input type="checkbox"/> no	Will other equipment be brought on site?	<input type="checkbox"/> yes	<input type="checkbox"/> no
Will alcohol be sold?	<input type="checkbox"/> yes	<input type="checkbox"/> no	Will sound amplification be used?	<input type="checkbox"/> yes	<input type="checkbox"/> no
Must contact 529-1470 for alcohol permit.			Bounce House?	<input type="checkbox"/> yes	<input type="checkbox"/> no

I declare under penalty of perjury that I am the authorized representative of the organization (activity) listed in this application and that the information I supplied here in is true and correct. I have carefully read, considered, and agreed to abide by all rules and regulations shown on the enclosures.

Applicant's Signature

Date

I agree to the above terms and conditions.

Complete this form and return to Park and Recreation Office along with 1 copy of Rental Contract. Two proofs of residency (if resident).